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November 23, 2004

Phone

Fax

To

Commissioner for Patents,

703-872-9306

.

James D. Jacobs

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Client/Matter No. 56129861-1

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FORM	First Named Inventor	see attached list	RECEIVED
	Art Unit	see attached list	CENTRAL FAX CENTER
(to be used for all correspondence after initial filing)	Examiner Name	see attached list	NOV 2 3 2004
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Reply to Missing Parts/ Incorplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	November 23, 2004		
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Firm Name Baken & McKenzle	1		
Signature Signature	-la	>	
Printed name James David Jacobs	, /		
Date / 11/23/2004	<i>C</i>	Reg. No. 24,299	
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REQUEST FOR WITHDRAWAL
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To: Commissioner fo	or Patents					
P.O. Box 1450						
Alexandria, VA 2	2313-1450					
Please withdraw me	as attorney or agent for the above	identified p	atent applica	tion, and		
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the attorneys/s	agents (with registration numbers) li	stad on the	attached no	2040) or		
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The reasons for this requ	uest are: Applicant has requested tran	sfer to anoth	er attorney/age	ent.		
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Date 11/23/2004		Telephone No. 212			12-751-5700	
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09/086, 133	Application no.	Filing date	First Named Inventor		Examiner Name	Docket Number
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